

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

Academy of Nutrition and Dietetics Political Action Committee

ADDRESS (number and street) ▼

1120 Connecticut Ave. NW

Suite 480

☐ Check if different than previously reported. (ACC)

Washington

DC

20036

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00143560

3. IS THIS
REPORT☒NEW
(N)

OR

☐AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15
Quarterly Report (Q1)☐ July 15
Quarterly Report (Q2)☐ October 15
Quarterly Report (Q3)☐ January 31
Year-End Report (YE)☐ July 31 Mid-Year
Report (Non-election
Year Only) (MY)☐ Termination Report
(TER)(b) Monthly
Report
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)
(Non-Election
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)
(Non-Election
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M / D D D / Y Y Y Y Y Y

in the
State of

(d) 30-Day

POST-Election

Report for the:

☒ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the
State of

DC

5. Covering Period

M M M / D D D / Y Y Y Y Y Y

10

16

2014

through

M M M / D D D / Y Y Y Y Y Y

11

24

2014

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Paul A Mifsud

Signature of Treasurer

Paul A Mifsud

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y

12

04

2014

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only**FEC FORM 3X**
Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Academy of Nutrition and Dietetics Political Action Committee

Report Covering the Period: From: M M / D D / Y Y Y Y Y 10 / 16 / 2014 To: M M / D D / Y Y Y Y Y 11 / 24 / 2014

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y Y 2014		237994.48
(b) Cash on Hand at Beginning of Reporting Period.....	171027.79	
(c) Total Receipts (from Line 19)	15410.00	120000.76
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	186437.79	357995.24
7. Total Disbursements (from Line 31)	8000.00	179557.45
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	178437.79	178437.79
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

Academy of Nutrition and Dietetics Political Action Committee

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y
10		16		2014

To:

M M	/	D D	/	Y Y Y Y
11		24		2014

I. Receipts
COLUMN A
Total This Period

COLUMN B
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

7108.00

37370.56

(ii) Unitemized

8302.00

82630.20

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ▶

15410.00

120000.76

(b) Political Party Committees

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

0.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5)

15410.00

120000.76

12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

13. All Loans Received

0.00

0.00

14. Loan Repayments Received.....

0.00

0.00

15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

0.00

16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

0.00

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3).....

0.00

0.00

(b) Levin Funds (from Schedule H5)

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),
12, 13, 14, 15, 16, 17, and 18(c))..... ▶

15410.00

120000.76

20. Total Federal Receipts

(subtract Line 18(c) from Line 19)..... ▶

15410.00

120000.76

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	0.00	38407.45
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	38407.45
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	8000.00	141150.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	8000.00	179557.45
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	8000.00	179557.45

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	15410.00	120000.76
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	15410.00	120000.76
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ►	0.00	38407.45
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ►	0.00	38407.45

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 6 OF 23
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Academy of Nutrition and Dietetics Political Action Committee

Full Name (Last, First, Middle Initial)

A. Ms. Brenda E Richardson

Mailing Address 4972 E Motsinger Rd

Keep

City

Salem

State

IN

Zip Code

47167-7759

FEC ID number of contributing
federal political committee.

C

Name of Employer

Dietary Consultants

Occupation

Rdn

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1028.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		18		2014

Transaction ID : A8A39FC85CC044694BEE

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Mr. Jey-Hong Hwang

Mailing Address 60 Plymouth Rd

City

Great Neck

State

NY

Zip Code

11023-1656

FEC ID number of contributing
federal political committee.

C

Name of Employer

Sodexo

Occupation

Rdn

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		18		2014

Transaction ID : AC93E21015AFD4DD1AAA

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

C. Ms. Susan B Foerster MPH

Mailing Address 5937 Sarah Ct

City

Carmichael

State

CA

Zip Code

95608-5554

FEC ID number of contributing
federal political committee.

C

Name of Employer

California Dept. of Public Health

Occupation

Manager

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

460.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		18		2014

Transaction ID : ABE72AE191B7E43CAB13

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)..... ►

1100.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 OF 23
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Academy of Nutrition and Dietetics Political Action Committee

Full Name (Last, First, Middle Initial)

A. Paul A Mifsud

Mailing Address 120 S Riverside Plz
Ste 2000

City State Zip Code
Chicago IL 60606-6995

FEC ID number of contributing
federal political committee.

C

Name of Employer

Academy Of Nutrition And

Occupation

Chief Financial Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

467.00

Date of Receipt

10 / 18 / 2014

Transaction ID : AE39EEF6B6C934BEE94A

Amount of Each Receipt this Period

10.00

Full Name (Last, First, Middle Initial)

B. Paul A Mifsud

Mailing Address 120 S Riverside Plz
Ste 2000

City State Zip Code
Chicago IL 60606-6995

FEC ID number of contributing
federal political committee.

C

Name of Employer

Academy Of Nutrition And

Occupation

Chief Financial Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

467.00

Date of Receipt

10 / 18 / 2014

Transaction ID : AABA22BD3499641988F2

Amount of Each Receipt this Period

2.00

Full Name (Last, First, Middle Initial)

C. Prof. Margaret P Garner RDN

Mailing Address The University Of Alabama
850 5th Ave East

City State Zip Code
Tuscaloosa AL 35401-7419

FEC ID number of contributing
federal political committee.

C

Name of Employer

University Of Alabama

Occupation

Rdn

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

10 / 18 / 2014

Transaction ID : AA5C267240B2647A1ABE

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

262.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Academy of Nutrition and Dietetics Political Action Committee

Full Name (Last, First, Middle Initial)

A. Mrs. Donna S Martin

Mailing Address 789 Burke Veterans Parkway

Burke County Board Of Educatio

City State Zip Code
Waynesboro GA 30830-4508

FEC ID number of contributing
federal political committee.

C

Name of Employer

Burke County Board Of Educatio

Occupation

Rd

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

10 / 18 / 2014

Transaction ID : AB352BE8FF96B4B4BAF4

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

B. Mr. Pepin Tuma

Mailing Address Academy of Nutrition and Dietetics

1120 Connecticut Ave NW Suite 480

City State Zip Code
Washington DC 20036-3989

FEC ID number of contributing
federal political committee.

C

Name of Employer

Academy Of Nutrition And

Occupation

Director, Regulatory Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.34

Date of Receipt

10 / 18 / 2014

Transaction ID : A83F37884D51E4B0E95F

Amount of Each Receipt this Period

42.00

Full Name (Last, First, Middle Initial)

C. Ms. Dianne K Polly Esq.

Mailing Address 910 Vance Ave

City State Zip Code
Memphis TN 38126-2911

FEC ID number of contributing
federal political committee.

C

Name of Employer

Shelby County Schools

Occupation

Rdn

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

10 / 18 / 2014

Transaction ID : A021A17D18D7A4699813

Amount of Each Receipt this Period

115.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

177.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Academy of Nutrition and Dietetics Political Action Committee

Full Name (Last, First, Middle Initial)

A. Sandra L Gill

Mailing Address College Of Business

5700 College Road - 107 Scholl Hal

City

State

Zip Code

Lisle

IL

60532-2851

FEC ID number of contributing
federal political committee.

C

Name of Employer

Benedictine University

Occupation

Academic Dean

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

10 / 18 / 2014

Transaction ID : AD6444AD1D8454436A2F

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Mrs. Mary Lynn Moore RDN

Mailing Address PO Box 5229

City

State

Zip Code

Jackson

MS

39296-5229

FEC ID number of contributing
federal political committee.

C

Name of Employer

Nutrition Systems Consult

Occupation

Rdn

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

10 / 18 / 2014

Transaction ID : AB4429D332F834718810

Amount of Each Receipt this Period

146.00

Full Name (Last, First, Middle Initial)

C. Mrs. Christine K Weithman

Mailing Address 59 Temple Pl

Ste 704

City

State

Zip Code

Boston

MA

02111-1342

FEC ID number of contributing
federal political committee.

C

Name of Employer

Health Management Resources

Occupation

Rd

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

10 / 18 / 2014

Transaction ID : A8AA7404DEF34FA2AAA

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

671.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 10 OF 23

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Academy of Nutrition and Dietetics Political Action Committee

Full Name (Last, First, Middle Initial)

A. Ms. Catherine Conway RD

Mailing Address 460 W 34th St
 Fl 11

City State Zip Code
 New York NY 10001-2320

FEC ID number of contributing
federal political committee.

C

Name of Employer

YAI/NIPD

Occupation

Rd

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

10 / 18 / 2014

Transaction ID : A4B4AE83063B64FEFA0E

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Dr. Dorothy C Chen-Maynard RD

Mailing Address 4951 Mariposa Dr

City State Zip Code
 San Bernardino CA 92404-1432

FEC ID number of contributing
federal political committee.

C

Name of Employer

California State University San Bernar

Occupation

Program Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

10 / 18 / 2014

Transaction ID : A0C24F78974744AA28D6

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

C. Mrs. Carol D Kourany

Mailing Address 12940 Brighton Ln

City State Zip Code
 Carmel IN 46032-9276

FEC ID number of contributing
federal political committee.

C

Name of Employer

Care Group

Occupation

Rd

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

10 / 18 / 2014

Transaction ID : AA4F82FF4087245CE866

Amount of Each Receipt this Period

53.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

573.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Academy of Nutrition and Dietetics Political Action Committee

Full Name (Last, First, Middle Initial)

A. Dr. Evelyn F Crayton RDN

Mailing Address PO Box 45

City

Mount Meigs

State

AL

Zip Code

36057-0045

FEC ID number of contributing
federal political committee.

C

Name of Employer

Living Well Associates

Occupation

Rdn

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

10 / 18 / 2014

Transaction ID : A60C15E7E24B44BE0B99

Amount of Each Receipt this Period

120.00

Full Name (Last, First, Middle Initial)

B. Ms. Tracy L Wilczek

Mailing Address Pritikin Longevity Center
8755 Nw 36th Street

City

Doral

State

FL

Zip Code

33178-2401

FEC ID number of contributing
federal political committee.

C

Name of Employer

Flik International

Occupation

Rdn

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

10 / 18 / 2014

Transaction ID : AAF97C787F45C43A5A67

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

C. Ms. Cynthia A Wolfram

Mailing Address 4507 Apollo St

City

Houston

State

TX

Zip Code

77018-3205

FEC ID number of contributing
federal political committee.

C

Name of Employer

Dietitians For Healthcare, LLP

Occupation

Rdn

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

10 / 18 / 2014

Transaction ID : A8A6439F8B8AE454FB12

Amount of Each Receipt this Period

300.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

440.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 12 OF 23
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

Academy of Nutrition and Dietetics Political Action Committee

Full Name (Last, First, Middle Initial)

A. Dr. Catherine W ChristieMailing Address University Of North Florida
Dept. Of Public HealthCity State Zip Code
Jacksonville FL 32224FEC ID number of contributing
federal political committee.

C

Name of Employer

Univ Of Florida

Occupation

Rdn

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	18	/	2014

Transaction ID : AFE8230989D9340DDBCF

Amount of Each Receipt this Period

70.00

Full Name (Last, First, Middle Initial)

B. Mrs. Denise A Andersen

Mailing Address 1411 Farmdale Rd

City State Zip Code
Saint Paul MN 55118-2739FEC ID number of contributing
federal political committee.

C

Name of Employer

Private Consultant

Occupation

Rdn

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1030.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	18	/	2014

Transaction ID : A0390AAEAD69240B1A35

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

C. Ms. Patricia M BabjakMailing Address 120 S Riverside Plz
Ste 2000City State Zip Code
Chicago IL 60606-6995FEC ID number of contributing
federal political committee.

C

Name of Employer

Academy Of Nutrition And

Occupation

CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1020.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	18	/	2014

Transaction ID : A3266F57280C647C4907

Amount of Each Receipt this Period

5.00

SUBTOTAL of Receipts This Page (optional)..... ►

95.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 OF 23

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Academy of Nutrition and Dietetics Political Action Committee

Full Name (Last, First, Middle Initial)

A. Ms. Charlotte A Hayes

Mailing Address 2144 Hills Ave.
Suite A

City State Zip Code
Atlanta GA 30318-2805

FEC ID number of contributing
federal political committee.

C

Name of Employer

Team Novo Nordisk

Occupation

Rd

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 18 / 2014

Transaction ID : A240BF4325310445A80E

Amount of Each Receipt this Period

5.00

Full Name (Last, First, Middle Initial)

B. Ms. Berit M Christensen RD

Mailing Address 1200 E West Hwy
Apt 522

City State Zip Code
Silver Spring MD 20910-8204

FEC ID number of contributing
federal political committee.

C

Name of Employer

Abbott Nutrition

Occupation

Rd

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 20 / 2014

Transaction ID : AFB90E92A58B54B1DB45

Amount of Each Receipt this Period

125.00

Full Name (Last, First, Middle Initial)

C. Phyllis Stell Crowley

Mailing Address 7907 S Honeywood Cove Dr

City State Zip Code
Salt Lake City UT 84121-5916

FEC ID number of contributing
federal political committee.

C

Name of Employer

Federal Government

Occupation

Rd

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 20 / 2014

Transaction ID : ABB6DC934F658406096B

Amount of Each Receipt this Period

200.00

SUBTOTAL of Receipts This Page (optional)..... ►

330.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Academy of Nutrition and Dietetics Political Action Committee

Full Name (Last, First, Middle Initial)

A. Dr. Ethan A Bergman RDN

Mailing Address 400 E University Way

College of Education and Professio

City

Ellensburg

State

WA

Zip Code

98926-7502

FEC ID number of contributing
federal political committee.

C

Name of Employer

Central Washington University

Occupation

Rdn

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

565.00

Date of Receipt

10 / 20 / 2014

Transaction ID : AFFF9D3108B9E4BFA872

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

B. Joyce A Gilbert

Mailing Address Association of Nutrition and Foods

406 Surrey Woods Drive

City

Saint Charles

State

IL

Zip Code

60174-2386

FEC ID number of contributing
federal political committee.

C

Name of Employer

J.a. Gilbert Associates

Occupation

Rdn

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

10 / 20 / 2014

Transaction ID : A92334669BCF54919A37

Amount of Each Receipt this Period

1500.00

Full Name (Last, First, Middle Initial)

C. Roger A Shewmake

Mailing Address Center For Family Medicine

1115 East 20th Street

City

Sioux Falls

State

SD

Zip Code

57105-1013

FEC ID number of contributing
federal political committee.

C

Name of Employer

Family Medicine Clinic Adminis

Occupation

Professor

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

10 / 20 / 2014

Transaction ID : A7BA2708DE91F4057853

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1770.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Academy of Nutrition and Dietetics Political Action Committee

Full Name (Last, First, Middle Initial)

A. Ms. Karen T Bellesky

Mailing Address 4000 N. Charles Street
Unit 906

City State Zip Code
Baltimore MD 21218-1762

FEC ID number of contributing
federal political committee.

C

Name of Employer

Chase Brexton

Occupation

Rdn

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1145.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 20 / 2014

Transaction ID : ADDF1970F0F0E4452A5E

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

B. Ms. Karen T Bellesky

Mailing Address 4000 N. Charles Street
Unit 906

City State Zip Code
Baltimore MD 21218-1762

FEC ID number of contributing
federal political committee.

C

Name of Employer

Chase Brexton

Occupation

Rdn

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1145.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 20 / 2014

Transaction ID : A9F67CF2E42024AD6890

Amount of Each Receipt this Period

5.00

Full Name (Last, First, Middle Initial)

C. Ms. Marianne Smith Edge

Mailing Address 516 Ford Ave

City State Zip Code
Owensboro KY 42301-4629

FEC ID number of contributing
federal political committee.

C

Name of Employer

Private Practice

Occupation

Rd

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 20 / 2014

Transaction ID : AA470BC2FB3504BF6966

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

295.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 OF 23

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Academy of Nutrition and Dietetics Political Action Committee

Full Name (Last, First, Middle Initial)

A. Mrs. Mary W Vester-Toews RDN

Mailing Address Ste 105

5446 N Palm Ave

City

Fresno

State

CA

Zip Code

93704-1945

FEC ID number of contributing
federal political committee.

C

Name of Employer

Dietary Directions, Inc.

Occupation

Rdn

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1150.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 20 / 2014

Transaction ID : A44F4076B2DC547A88E8

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Ms. Lisa Eaton Wright

Mailing Address 12 Hilltop Ct

City

Lemont

State

IL

Zip Code

60439-6134

FEC ID number of contributing
federal political committee.

C

Name of Employer

Moraine Valley Community College

Occupation

Wellness Coordinator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

630.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 21 / 2014

Transaction ID : AF101EF6F1A464BC0AFC

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

c. Dr. Dorothy C Chen-Maynard RD

Mailing Address 4951 Mariposa Dr

City

San Bernardino

State

CA

Zip Code

92404-1432

FEC ID number of contributing
federal political committee.

C

Name of Employer

California State University San Bernar

Occupation

Program Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 21 / 2014

Transaction ID : A3BD7643DD6984D33844

Amount of Each Receipt this Period

5.00

SUBTOTAL of Receipts This Page (optional)..... ►

605.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Academy of Nutrition and Dietetics Political Action Committee

Full Name (Last, First, Middle Initial)

A. Ms. Jeanne Blankenship RDN

Mailing Address 1713 Fairview Ave

City

Mc Lean

State

VA

Zip Code

22101-4709

FEC ID number of contributing
federal political committee.

C

Name of Employer

Academy of Nutrition and Dietetics

Occupation

VP, Policy Initiatives & Advocacy

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1095.00

Date of Receipt

10 / 21 / 2014

Transaction ID : A735CCAFB26714ABDB17

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

B. Phebe C Chin

Mailing Address 7711 W 82nd St

City

Playa Del Rey

State

CA

Zip Code

90293-7914

FEC ID number of contributing
federal political committee.

C

Name of Employer

Private Consultant

Occupation

Rd

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

10 / 21 / 2014

Transaction ID : A46A263F91D574923978

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. Mrs. Roberta A Cooper-Meyer

Mailing Address 1208 Knollwood Rd

City

Deerfield

State

IL

Zip Code

60015-3338

FEC ID number of contributing
federal political committee.

C

Name of Employer

Lowell Federal Healthcare Center

Occupation

Clinical Dietitian

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

505.00

Date of Receipt

10 / 21 / 2014

Transaction ID : AB37BD21A8BF4451B9A4

Amount of Each Receipt this Period

5.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

275.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 18 OF 23
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Academy of Nutrition and Dietetics Political Action Committee

Full Name (Last, First, Middle Initial)

A. Ms. Virginia J Dantone-Debarberis RDN

Mailing Address 112 River Oaks Dr

City State Zip Code
La Place LA 70068-7100

FEC ID number of contributing
federal political committee.

C

Name of Employer

Nutrition Education Resources

Occupation

Rdn

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

505.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 27 / 2014

Transaction ID : AB7F711EFEDAE475986A

Amount of Each Receipt this Period

5.00

Full Name (Last, First, Middle Initial)

B. Paul A Mifsud

Mailing Address 120 S Riverside Plz
Ste 2000

City State Zip Code
Chicago IL 60606-6995

FEC ID number of contributing
federal political committee.

C

Name of Employer

Academy Of Nutrition And

Occupation

Chief Financial Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

517.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2014

Transaction ID : A2BD297CAD8494CCDA0D

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

C. Ms. Trisha Fuhrman

Mailing Address 1932 Prospector Ridge Dr

City State Zip Code
Ballwin MO 63011-4808

FEC ID number of contributing
federal political committee.

C

Name of Employer

Malnutrition Antagonists

Occupation

Rd

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1283.89

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2014

Transaction ID : A935FDCB00BCE4794B0F

Amount of Each Receipt this Period

90.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

145.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Academy of Nutrition and Dietetics Political Action Committee

Full Name (Last, First, Middle Initial)

A. Mrs. Lorraine E Matthews RDN

Mailing Address Columbus County Health Departm
304 Jefferson Street

City State Zip Code
Whiteville NC 28472-3602

FEC ID number of contributing
federal political committee.

C

Name of Employer
Columbus County Health Departm

Occupation
Rdn

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

10 / 31 / 2014

Transaction ID : A6C6B4DD2617640FC835

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

B. Ms. Mary Pat Raimondi

Mailing Address 1120 Connecticut Ave NW, Ste 480

City State Zip Code
Washington DC 20036-3989

FEC ID number of contributing
federal political committee.

C

Name of Employer
Academy of Nutrition and Dietetics

Occupation
Rd

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Date of Receipt

10 / 31 / 2014

Transaction ID : A5C2DC380D46B43F6B5C

Amount of Each Receipt this Period

45.00

Full Name (Last, First, Middle Initial)

C. Mrs. Christine K Weithman

Mailing Address 59 Temple Pl
Ste 704

City State Zip Code
Boston MA 02111-1342

FEC ID number of contributing
federal political committee.

C

Name of Employer
Health Management Resources

Occupation
Rd

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

11 / 06 / 2014

Transaction ID : A2E1D1A87AA5C4EA0B9A

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

120.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Academy of Nutrition and Dietetics Political Action Committee

Full Name (Last, First, Middle Initial)

A. Mrs. Kellene A Isom

Mailing Address 44 Quint Ave
Apt 16

City Allston State MA Zip Code 02134-2567

FEC ID number of contributing
federal political committee.

C

Name of Employer
Brigham & Women's Hospital

Occupation
Rd

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 14 / 2014

Transaction ID : ADD40208567E049AB98D

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

250.00

7108.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 21 OF 23

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Academy of Nutrition and Dietetics Political Action Committee

Full Name (Last, First, Middle Initial)

A. MATSUI FOR CONGRESS

Mailing Address PO BOX 1738

City	State	Zip Code
SACRAMENTO	CA	95812

Purpose of Disbursement
Rep. Doris Matsui [CA-06-D]

Candidate Name

Rep. Doris O. Matsui

Office Sought:	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State: CA	District: 06

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		28		2014

Transaction ID : B2BA06E9E6F374F04ADE

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. FRIENDS OF PAT TOOMEY

Mailing Address 228 S. WASHINGTON ST., SUITE 115

City	State	Zip Code
ALEXANDRIA	VA	22314

Purpose of Disbursement
Senator Pat Toomey [PA-R]

Candidate Name

Sen. Pat J. Toomey

Office Sought:	<input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President
State: PA	District:

Disbursement For: 2016
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		28		2014

Transaction ID : BBEA7B01393DD44FB905

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

C. RENEE ELLMERS FOR CONGRESS COMMITTEE

Mailing Address PO BOX 99567

City	State	Zip Code
RALEIGH	NC	27624

Purpose of Disbursement
Renee Ellmers [NC-02-R]

Candidate Name

Rep. Renee L. Ellmers

Office Sought:	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State: NC	District: 02

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		28		2014

Transaction ID : B98842A06451B4137A51

Amount of Each Disbursement this Period

500.00

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

3500.00

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 22 OF 23

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Academy of Nutrition and Dietetics Political Action Committee

Full Name (Last, First, Middle Initial)

A. DENNY HECK FOR CONGRESS

Mailing Address PO BOX 235

City	State	Zip Code
OLYMPIA	WA	98507

Purpose of Disbursement
Denny Heck [WA-10-D]

Candidate Name

Rep. Denny HeckOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☐ Primary ☒ General
☐ Other (specify) ▼

State: WA District: 10

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		28		2014

Transaction ID : BA8143CD99C24404DA24

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

B. Mark Pryor for US Senate CommitteeMailing Address MARK PRYOR FOR US SENATE
Post Office Box 2720

City	State	Zip Code
Little Rock	AR	72203-2720

Purpose of Disbursement
Mark Pryor [AR-D]

Candidate Name

Sen. Mark L. PryorOffice Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For: 2014
☐ Primary ☒ General
☐ Other (specify) ▼

State: AR District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		28		2014

Transaction ID : BCBEE8C2EE25446608C4

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

C. THE NIKI TSONGAS COMMITTEE

Mailing Address PO BOX 1454

City	State	Zip Code
LOWELL	MA	01853

Purpose of Disbursement
Nicola S. Tsongas [MA-03-D]

Candidate Name

Rep. Niki S. TsongasOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☐ Primary ☒ General
☐ Other (specify) ▼

State: MA District: 03

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		28		2014

Transaction ID : B3D1FD940125D44C0999

Amount of Each Disbursement this Period

500.00

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

3500.00

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	21b		22	X	23		24		25		26
	27		28a		28b		28c		29		30b

Academy of Nutrition and Dietetics Political Action Committee

A. DUCKWORTH FOR CONGRESS

Transaction ID : B5339A2920E9A4838A24

Rep. Tammy Duckworth

Category/
Type

Disbursement For: 2014

☐ Primary ☒ General

☐ Other (specify) ▼

State: IL District: 08

Full Name (Last, First, Middle Initial)

B.

Date of Disbursement

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

C.

Date of Disbursement

Mailing Address

City	State	Zip Code
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Purpose of Disbursement

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

SUBTOTAL of Disbursements This Page (optional).....

1000.00

TOTAL This Period (last page this line number only).....

8000.00